## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

|   |  |   |                  | 066.                           | 06                  | 13                  |            |                   |                        |          |                               |                        |  |
|---|--|---|------------------|--------------------------------|---------------------|---------------------|------------|-------------------|------------------------|----------|-------------------------------|------------------------|--|
| CLAIMS AS FILED - PART I<br>(Column 1)  |  |   |                  |                                |                     | mn 2)               |            | SMALL ENTITY TYPE |                        |          | OTHER THAN<br>OR SMALL ENTITY |                        |  |
| TOTAL CLAIMS  |  |   | 12-              |                                |                     |                     | F          | ATE               | FEE                    | 1        | RATE                          | FEE                    |  |
| FOR   |  |   | NUMBER FILED     |                                | NUMBER EXTRA        |                     | ВА         | SIC FEE           | 375.00                 | OR       | BASIC FEE                     | 750.00                 |  |
| то  | TAL CHARGEA                                    | BLE CLAIMS                                | 7 minus 20=      |                                | •                   |                     | ,          | (\$ 9=            |                        | OR       | X\$18≃                        |                        |  |
| INDEPENDENT CLAIMS  |  |   | 7 minus 3 =      |                                | *                   |                     | 7          | (42=              |                        | OR       | X84=                          |                        |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |                  |                                |                     |                     | <b> </b>   | 140=              |                        |          | +280=                         |                        |  |
| * If the difference in column 1 is less than zero, enter  |  |   |                  |                                | "0" in c            | olumn 2             |            | OTAL              |                        | OR<br>OR | TOTAL                         | 20?5                   |  |
|   |  |   |                  |                                |                     | (Column 3)          |            |                   | ENTITY                 | OR       | OTHER<br>SMALL                | THAN                   |  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY<br>FOR | PRESENT<br>EXTRA    | F          | RATE              | ADDI-<br>TIONAL<br>FEE |          | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | . 32                                      | Minus            | ** 6                           | 20                  | = D                 | ×          | \$ 9=             |                        | OR       | X\$18=                        | 21600                  |  |
|   | Independent                                    | * 4                                       | Minus            | ***                            | 3                   | = /                 | >          | (42=              | 7                      | OR       | X84=                          | Store                  |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |                  |                                |                     |                     |            | 140=              |                        | OR       | +280=                         |                        |  |
|   |  |   |                  |                                |                     |                     |            | TOTAL<br>IT. FEE  |                        | OR       | TOTAL<br>ADDIT, FEE           |                        |  |
|   |  |   |                  |                                | •                   |                     |            |                   |                        |          |                               |                        |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | HIGH<br>NUM<br>PREVIO<br>PAID  | BER<br>DUSLY        | PRESENT<br>EXTRA    | F          | ATE               | ADDI-<br>TIONAL<br>FEE |          | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus            | **                             |                     | E .                 | X          | \$ 9=             |                        | OR       | X\$18=                        |                        |  |
|   | Independent                                    | *   | Minus            | ***                            | · C1 A154           | -                   | 7          | 42=               |                        | OR       | X84=                          |                        |  |
| _   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |                                |                     |                     |            | 140=              |                        | OR       | +280=                         |                        |  |
| TOT<br>ADDIT. FI  |  |   |                  |                                |                     |                     |            |                   |                        | OR       | TOTAL<br>ADDIT. FEE           |                        |  |
|   |  | (Column 1)                                |                  | (Colur                         |                     | (Column 3)          |            | 11.1 1            |                        |          | NOOH. 17EC                    |                        |  |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | HIGH<br>NUM<br>PREVIO<br>PAID  | BER<br>DUSLY        | PRESENT<br>EXTRA    | R          | ATE               | ADDI-<br>TIONAL<br>FEE |          | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  |   | Minus            | **                             |                     | =                   | ×          | \$ 9=             |                        | OR       | X\$18=                        |                        |  |
|   | Independent                                    | *   | Minus            | ###                            |                     | =                   | X42=       | 42=               |                        | OR       | X84=                          |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |                                |                     |                     |            | 40=               |                        |          |                               |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." |  |   |                  |                                |                     |                     |            |                   | <u> </u>               | OR       | +280=                         |                        |  |
| ***   | If the "Highest Nu<br>if the "Highest Nu       | ~   | TOTAL<br>IT. FEE |                                |                     | TOTAL<br>ADDIT. FEE |            |                   |                        |          |                               |                        |  |
|   | The "Highest Nun                               | nber Previously Pai                       | d For (Total or  | Independ                       | eni) is the         | highest numbe       | er found i | n the app         | ropriate bo            | in cot   | umn f.                        |                        |  |